B1 (Official Form 1) (1/08)

United States Bankruptcy Court District of Arizona					Vo	luntary Petition		
Name of Debtor (if individual, enter Last, First, Middle):  Paradise Valley Medical Properties, LLC			Name of Joint Debtor (Spouse) (Last, First, Middle):					
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):						e Joint Debtor i nd trade names)		8 years
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): <b>20-4029449</b>			Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all):					
Street Address of Debtor (No. & Street, City, State & Zip Code):  4550 E Bell Rd			Street Addr	Street Address of Joint Debtor (No. & Street, City, State & Zip Code):				
#170 Phoenix, AZ  ZIPCODE 85032			1					ZIPCODE
County of Residence or of the Principal Place of Bu Maricopa	isiness:		County of I	Residenc	e or of t	he Principal Pla	ce of Bus	siness:
Mailing Address of Debtor (if different from street	address)		Mailing Ad	ldress of	Joint De	ebtor (if differer	nt from st	reet address):
	ZIPCODE		]					ZIPCODE
Location of Principal Assets of Business Debtor (if	different from street addre	ss ab	ove):					
								ZIPCODE
Type of Debtor (Form of Organization) (Check one box.)  Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. Corporation (includes LLC and LLP) Partnership Other (If debtor is not one of the above entities, check this box and state type of entity below.)  Tax-Exempt (Check one (Check one U.S.C. § 101(51B) Railroad Stockbroker Commodity Broker Clearing Bank Other  Tax-Exempt (Check box, if a			the Petition is Filed (Check one box.)  Chapter 7					
Debtor is a tax-exempt Title 26 of the United 3 Internal Revenue Code			tates Code (th		per	sonal, family, o d purpose."	•	
Filing Fee (Check one b	oox)		Check one	hov:		Chapter 11 I	Debtors	
Full Filing Fee attached  Filing Fee to be paid in installments (Applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.			☐ Debtor is ☐ Debtor is ☐ Check if: ☐ Debtor's	s a small s not a sr s aggrega	te nonco	iness debtor as o	defined ir	U.S.C. § 101(51D). n 11 U.S.C. § 101(51D). s owed to non-insiders or
Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.			Check all a	pplicables being finces of the	e boxes led with ne plan v	this petition	epetition	from one or more classes of
Statistical/Administrative Information  ☐ Debtor estimates that funds will be available for distribution to unsecured creditors.  ☑ Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.					le for	THIS SPACE IS FOR COURT USE ONLY		
5,0	000- 5,001- 000 10,000		001- 000	25,001- 50,000		50,001- 100,000	Over 100,000	)
				\$100,000 to \$500		\$500,000,001 to \$1 billion	More th	
Estimated Liabilities	_		0,000,001 to 00 million	\$100,00 to \$500		\$500,000,001 to \$1 billion	More th	

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B1 (Official Form 1) (1/08)

Name of Debtor(s): **Voluntary Petition** Paradise Valley Medical Properties, LLC This page must be completed and filed in every case) Prior Bankruptcy Case Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Date Filed: Location Where Filed:**None** Case Number: Date Filed: Location Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: None District: Relationship: Judge: Exhibit B Exhibit A To be completed if debtor is required to file periodic reports (e.g., forms (To be completed if debtor is an individual 0K and 10Q) with the Securities and Exchange Commission pursuant to whose debts are primarily consumer debts.) Section 13 or 15(d) of the Securities Exchange Act of 1934 and is I, the attorney for the petitioner named in the foregoing petition, declare requesting relief under chapter 11.) that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have Exhibit A is attached and made a part of this petition. explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by § 342(b) of the Bankruptcy Code. X Signature of Attorney for Debtor(s) Date Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health Yes, and Exhibit C is attached and made a part of this petition. **▼** No Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: Exhibit D also completed and signed by the joint debtor is attached a made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box.) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes.) ☐ Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord or lessor that obtained judgment) (Address of landlord or lessor) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

Page 2

### **Voluntary Petition**

(This page must be completed and filed in every case)

Name of Debtor(s):

### Paradise Valley Medical Properties, LLC

### **Signatures**

### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United State Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X
Signature of Debtor

X
Signature of Joint Debtor

Telephone Number (If not represented by attorney)

### Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition. (Check only **one** box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.

☐ Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

Signature of For	eign Representative		
Printed Name of Foreign Representative			
Timed Name of	roreign Kepresentative		

### Signature of Attorney\*

### X /s/ Stanford E. Lerch

Date

Signature of Attorney for Debtor(s)

Stanford E. Lerch 001287 Lerch & DePrima, PLC 4000 N. Scottsdale Road Suite 107 Scottsdale, AZ 85251

slerch@ldlawaz.com

November 25, 2009

November 25, 2009

Date

information in the schedules is incorrect.

### **Signature of Non-Attorney Petition Preparer**

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

### $Signature\ of\ Debtor\ (Corporation/Partnership)$

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

\*In a case in which  $\S$  707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

( /	/s/ John D Marshall				
5	Signature of Authorized Individual				
,	John D Marshall				
F	Printed Name of Authorized Individual				

X

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.

# United States Bankruptcy Court District of Arizona

IN RE:	Case No
Paradise Valley Medical Properties, LLC	Chapter 11
Debtor(s)	

### LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

Following is the list of the debtor's creditors holding the 20 largest unsecured claims. The list is prepared in accordance with Fed. R. Bankr. P. 1007(d) for filing in this chapter 11 [or chapter 9] case. The list does not include (1) persons who come within the definition of "insider" set forth in 11 U.S.C. § 101, or (2) secured creditors unless the value of the collateral is such that the unsecured deficiency places the creditor among the holders of the 20 largest unsecured claims. If a minor child is one of the creditors holding the 20 largest unsecured claims, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Wells Fargo Bank, N.A.		Bank loan		926,958.4	14
(1) Name of creditor and complete mailing address including zip code	(2) Name, telephone number and complete mailing address, including zip code, of employee, agent or department of creditor familiar with claim who may be contacted	(3) Nature of claim (trade debt, bank loan, government contract, etc.)	(4) Indicate if claim is contingent, unliquidated, disputed or subject to setoff	(5) Amount of claim (if secured also state value of security)	

Wells Fargo Bank, N.A. 305 E Main St, Ste 200 Mesa, AZ 85201

### DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP

I, [the president *or* other officer *or* an authorized agent of the corporation][*or* a member *or* an authorized agent of the partnership] named as the debtor in this case, declare under penalty of perjury that I have read the foregoing list and that it is true and correct to the best of my information and belief.

Date:	November 25, 2009	Signature:	/s/ John D Marshall	
			John D Marshall, (Print Na	ame and Title)

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## United States Bankruptcy Court District of Arizona

IN RE:			Case No			
Paradise Valley Medical Properties, LLC			Chapter 11			
	Debtor(	•				
	DISCLOSURE OF	COMPENSATION OF ATTO	RNEY FOR DEBTOR			
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me with one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:					
	For legal services, I have agreed to accept		\$			
	Prior to the filing of this statement I have received					
	Balance Due		\$			
2.	The source of the compensation paid to me was:  Debtor  Other (specify):					
3.	The source of compensation to be paid to me is:  Debtor  Other (specify):					
4.	I have not agreed to share the above-disclosed com	pensation with any other person unless they	are members and associates of my law firm.			
	I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.					
5.	In return for the above-disclosed fee, I have agreed to re	nder legal service for all aspects of the bankr	uptcy case, including:			
	a. Analysis of the debtor's financial situation, and ren					
	b. Preparation and filing of any petition, schedules, st c. Representation of the debtor at the meeting of cred					
	d. Representation of the debtor at the meeting of cred d. Representation of the debtor in adversary proceedings.	Ç. , ,	arned nearings dicteor,			
e. [Other provisions as needed]						
6.	By agreement with the debtor(s), the above disclosed fee	does not include the following services:				
		CERTIFICATION				
	certify that the foregoing is a complete statement of any a proceeding.	greement or arrangement for payment to me	for representation of the debtor(s) in this bankruptcy			
	November 25, 2009	/s/ Stanford E. Lerch				
	Date	Stanford E. Lerch 001287 Lerch & DePrima, PLC 4000 N. Scottsdale Road Suite 107 Scottsdale, AZ 85251				
1		alarah @ldlawar aam				